Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Title:: AUTOMATED BANKING APPARATUS AND

METHOD

Attorney Docket Number:: D-1116R1 CIP

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 61

Total Drawing Sheets:: 47

Small Entity:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Inventor Information

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: J.

Middle Name:: Richard

Family Name:: Hanna

Name Suffix::

City of Residence:: Massillon

State or Prov. Of Residence:: OH

Country of Residence:: US

Street:: 9627 Pondera Street, NW

City:: Massillon

State or Province:: OH

Country:: US

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Randall

Middle Name:: W.

Family Name:: Jenkins

Name Suffix::

City of Residence:: Orrville

State or Prov. Of Residence:: OH

Country of Residence:: US

Street:: 1458 Country Lane

City:: Orrville

State or Province:: OH

Country:: US

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Mark

Middle Name:: A

Family Name:: DePietro

Name Suffix::

City of Residence:: Canton

State or Prov. Of Residence:: OH

Country of Residence:: US

Street:: 3907 Harvard Ave NW

City:: Canton

State or Province:: OH

Country:: US

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Alan

Middle Name::

Family Name:: Rozlosnik

Name Suffix::

City of Residence:: Louisville

State or Prov. Of Residence:: OH

Country of Residence:: US

Street:: 308 Superior Street

City:: Louisville

State or Province:: OH

Country:: US`

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert

Middle Name:: V.

Family Name:: Artino

Name Suffix::

City of Residence:: North Canton

State or Prov. Of Residence:: OH

Country of Residence:: US

Street:: 5211 Echoglenn NW

City:: North Canton

State or Province:: OH

Country:: US

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Steven

Middle Name:: R.

Family Name:: Davis

Name Suffix::

City of Residence:: North Lawrence

State or Prov. Of Residence: OH

Country of Residence:: US

Street:: 5985 Lovers Lane

City:: North Lawrence

State or Province:: OH

Country:: US

Correspondence Information

Correspondence Customer Number::

28995

Representative Information

			 		
Representative Customer Number:	:	28995			

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
	,	Application::	Date::
This Application	Continuation-in-part of	09/408,858	09/30/1999
09/408,858	Non-Provisional of	60/109,941	11/25/1998
09/408,858	Non-Provisional of	60/135,720	05/25/1999

Assignee Information

Assignee Name::

Diebold, Incorporated